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ABSTRACT

This paper offers profiles of females with behavioral/emotional disorders and suggests that these young women have unique needs. The paper discusses selected characteristics and assessment considerations and offers recommendations that will facilitate more responsive social, correctional, and educational programming. Characteristics of these young women include truancy and running away from home; familial patterns of sexual and physical abuse; dependency, withdrawal, and defiance or passivity; criminal behavior; ineffective instructional and transition programs; and addictive behavior. Comprehensive interdisciplinary assessment should include depression inventories; checklists of social competence; and standardized and criterion-referenced measures of cognitive, academic, and social skills. Recommendations call for effective educational prevention and treatment programs designed with gender differences in mind, comprehensive research studies that examine the characteristics of females with emotional/behavioral disorders, and training of educators and other professionals in gender differences and recognition of behavioral indicators. (Contains 20 references.) (JDD)

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Females with Emotional and Behavioral Disorders: Unique Considerations

Running Head: FEMALES WITH EMOTIONAL AND BEHAVIORAL DISORDERS

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Abstract

Profiles of females with behavioral/emotional disorders emerging from the literature, suggest that these young women have unique needs. Descriptions of selected characteristics and assessment considerations that are related to females with behavioral/emotional disorders were synthesized from relevant research. Recommendations are discussed that propose changing educational programming in order to make curriculum, methods, and service delivery more responsive to the specific needs of females with behavioral/ emotional disorders.

Females with Emotional and Behavioral Disorders:

Unique Considerations

> Cindy was diagnosed as "seriously emotionally disturbed" by school professionals at the age of 9. She has been arrested two times, once for stealing a car and another time for shoplifting. She is on probation. Cindy does not like school and tries to avoid it at all costs. The teachers have tried to get Cindy interested in a vocational educational program, but the school's focus on agriculture and mechanics hasn't seemed to suit her. Cindy and her aunt feel that no one is helping them and no one in the school understands girls like her.

Introduction

Given the emergence of a psychology of women in the mainstream of research and practice, it is critical that educational practices become responsive to students like Cindy. While in the past, few research studies focused on the needs and characteristics of females with emotional and behavioral disorders, there is some evidence from recent investigations that suggests females with these disorders have unique needs. Most educational programs, assessment procedures, curriculum, and service delivery have been developed on a knowledge-base obtained from studies conducted with males who have emotional/behavioral disorders. The profile of the female with emotional/ behavioral disorders emerging from psychological, educational, and sociological research suggests that programmatic changes are necessary if we are to meet the special needs of these females.

A critical point at which to begin, is to examine the characteristics of females with emotional/behavioral disorders. Few studies have

specifically examined these young women, however, selected research results on similar populations hold significant implications for females with emotional/behavioral disorders. A brief review of selected characteristics related to females with emotional/behavioral disorders will be followed by a discussion of assessment considerations. And finally, recommendations will be offered that will facilitate more responsive social, correctional, and educational programming.

Characteristics

Truancy and Running Away From Home

Although female adolescents comprise a large portion of the adolescent truant and homeless population (Schorr, 1989), the prevalence of truancy and running away from home among female adolescents with emotional/ behavioral disorders is unknown. Research that has examined truancy and running away behavior has focused on nondisabled populations. In these studies, differences between truant or runaway males and females have emerged.

Among nondisabled adolescents, there is a higher frequency of truancy among females than males, and the problems that precipitate truancy in females seem to be different than those among males (Howard, Haynes, and Atkinson 1986). Female truancy occurs because of conflicts over autonomy in the home and restrictive parents, whereas adolescent male truancy has been linked to delinquent and antisocial acts, and

detached or rejecting families (Young, Godfrey, Matthews & Adams, 1983). Young, et. al., also found that females ran away from home less often because of school problems than did the males. Many females have been found to be running away from sexual abuse, while the frequency of males running for this reason is lower.

The effects of truancy are serious and lifelong (Schultz, 1987). Chronic truants have a higher risk for unemployment, criminal convictions, substance abuse, and other difficulties (Kaufman, 1989; Robins & Ratcliff, 1980). There is some evidence from studies with nondisabled subjects that the effects of truancy may also differ between males and females. Females who are chronically absent from school differ from males in that they are less likely to be employed, two times as likely to be on public assistance, less likely to participate in conventional activities, have a higher dropout rate, and have higher rates of hospitalization (Kandel, Taveis & Kandel, 1984). More females than males who are truant or in gangs come from single parent or broken homes (Bowker & Klein, 1983).

Sexual and Physical Abuse

It is often recognized that intergenerational familial patterns of sexual and physical abuse lie at the center of behavior/emotional problems exhibited by children in general, and females in particular. For many of these young females this abuse is at the "eye of the storm" with all other behavioral/emotional problems radiating from or revolving around these

central issues. Sexual and physical abuse may take the form of incest, rape, battering and/or sexual exploitation; and what begins in childhood is often perpetuated into adult relationships.

One common element found in incestuous families is a dominant, patriarchal father figure, who usually initiates incest by rewards and playing on the affection of the young female. Later, the perpetrator may employ force and threats to continue the incestuous relationship, which in most instances persists over a period of years. As a result of these experiences, young females often learn to get what they want from dominant males by flattering, exciting, titillating, and manipulating them. Simultaneously, they learn that dominant males will treat them like property, as an object to satisfy their needs. It is not a coincidence that victims of incest are more likely than other females to experience repeated sexual exploitation and oppression throughout their lives (Weisheit & Mahan, 1988).

Psychological

Females with emotional/behavioral disorders come to school with a variety of psychological needs. Dependency, both economic and social, a condition commonly seen in females who are emotionally or behaviorally disordered (Gibson, 1976; Kruttschnitt, 1982; Lerner, 1983), makes the developmental process of identification and building autonomy even more difficult than when it takes place under favorable conditions.

In a study of 8-10 year old girls who were rejected by their peers,

cluster analysis revealed the girls fell into two groups. The more deviant group was characterized by withdrawal, anxiety, and low academic functioning (French, 1990). This is particularly alarming because most of these behaviors are likely to be overlooked in an academic setting and not recognized as concomitant behaviors to low academic functioning.

Stephens (1987), in her work with adult female suicide attempters, identified two distinct psychological patterns of adolescence: (1) a cheap thrills pattern of defiance, rebelliousness, acting-out, drug use and indiscriminate sexuality; and, (2) a humble-pie pattern of over conformity, docility, passivity, and emotional submergence. This information lends support to the call for earlier interventions that address issues specifically related to young females with behavior/emotional problems.

Criminal Behavior

Girls and women, although affected by the drug epidemic, still commit more "economic" crimes than any other. These crimes, such as credit card fraud, writing bad checks, and welfare fraud, make up the highest number of crimes committed by girls and women.

It is not uncommon for girls to have a great deal of court contact before actually being placed in a juvenile or adult correctional setting. Most judges are reluctant to place girls in correctional settings, and so will try returning them home with supervision, alternative placements, and a variety of residential options before incarceration. This allows many girls

to avoid placement in a correctional setting, however, when they do attend such an institution, they are more likely to be severely impacted, and the prognosis for treatment is not good.

Education and Transition

Outcome variables of the educational process indicate the ineffectiveness of instructional and transition programs for females with emotional/behavioral disorders. Frank, Sitlington & Carson (1991) examined the transition status of adolescents. The findings were discouraging for both the female and the male adolescents, but especially disheartening were the data on the females. Unemployment figures were much higher for the females in the study, and when employed, the females made significantly lower wages than the males. The training these females received in high school did not insure that they would be able to become functioning members of the world of work.

Addictive Behavior

Research suggests that females and males tend to differ in terms of addictive behavior, whether the addiction is related to food or drugs. It has been shown that female adolescents use drugs, alcohol, and tobacco for different reasons and at different rates than male adolescents (Bodinger-Deuriarte, 1991). In her report, Bodinger-Deuriarte states that adolescent females drug and alcohol behaviors are influenced by different factors than those that drive male behaviors in these areas.

The American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders III-Revised (DSM III-R) defines four syndromes that are characterized by gross disturbances in eating behavior: Anorexia Nervosa, Bulimia Nervosa, Pica, and Rumination Disorder of Infancy. Two of these disorders, Anorexia and Bulimia, are predominantly found in young females, with age of onset usually between 12 and 18 years of age. In the case of Anorexia, it is one of the few psychiatric illnesses that has mortality rates of up to 18%. Both disorders are highly correlated with familial behavioral patterns that include major depression. The associated features of these two disorders include other obsessive compulsive behaviors (Anorexia) and psychoactive substance abuse or dependence (Bulimia).

Assessment Considerations

Behaviorally, females are often withdrawn, depressed, or anxious and tend to internalize their feelings (Epstein, Cullinan & Lloyd, 1986). Academically, girls appear to compensate better for learning differences than do boys (Pennington, 1991). Because referrals for assessment are often the result of behavioral rather than academic concerns, attention to girls who experience emotional and learning problems may be minimized by current referral practices.

Ideally, diagnostic interviews and standardized measures of cognitive, academic, and social skills should be used for screening and early

diagnosis of those who are "at risk" for emotional/behavioral disorders. Therefore, young girls who have a history of physical and sexual abuse or a family history of incarceration might be identified early for special education or counseling services. There is a very real need for developing early screening devices that can be systematically used in order to identify subclinical cases in their early stages, when they might be more amenable to intervention. Unfortunately, however, the focus of current assessment practice is on assigning pathology to the individual and not in evaluating the antecedents of behavioral problems or in identifying underlying distress. Rather, the prevailing labeling system, driven by the DSM III-R, may foster a number of misconceptions regarding the conduct of young females who are delinquent (Bowers, 1990).

The comprehensive interdisciplinary assessment should consider the interaction of contributing biological and physical factors on behavior. Depression inventories, interview schedules, and checklists of social competence should be used to evaluate coping mechanisms and adaptive behavior. Utilizing school records, standardized and criterion-referenced measures should be administered to estimate general intellectual functioning, determine academic strengths and weaknesses, and identify problem-solving strategies used by the adolescent. The efficacy of the current school placement and program of instruction should be evaluated on the basis of this information. Additionally, the multidisciplinary

assessment team should collaborate in the design of an individual transition program that identifies the resources that will maximize continued academic, vocational, social, and emotional development (Trapani, 1990).

Recommendations

Effective educational prevention and treatment programs should be designed with gender-differences in mind. Traditionally, education, as well as other disciplines, such as medicine and psychology, have generalized the results of studies done on males with emotional/behavioral disorders to programs and practices serving females with these disorders. While females constitute only a small proportion of the total school-aged population diagnosed "emotionally/ behaviorally disordered", minority status has never justified ignorance of a minority's needs. Further, the low prevalence rates of females in this diagnostic category indicate that we have much to learn about the identification of, and early intervention with females who have emotional/behavioral disorders.

Comprehensive research studies that examine the characteristics of females with emotional/behavioral disorders are needed. A larger proportion of funds must be designated so that the quality of research parallels that of male counterparts. The products of the research efforts should include recommendations for academic, functional, affective, and vocational curricula designed around the unique needs of females with emotional/behavioral disorders. Refining assessment practices will

contribute to the overall therapeutic and educational intervention with females who have emotional/behavioral disorders. The provision of gender-specific programming, assessment, intervention, and transitional support services are pivotal to confronting the needs of this population.

Following the development of a comprehensive knowledge-base on females with emotional/behavioral disorders, educators and other professionals working with these young women must be trained in gender differences pertaining to sexual abuse, addictive behavior, suicide, anxiety, family dysfunction, truancy, and criminal behavior. As part of this training, educators should be taught to recognize concomitant behaviors to various behavioral indicators such as low academic functioning so that serious conditions can be identified and treated.

Conclusion

While we may not have all the answers to our questions concerning what and how females with emotional/ behavioral disorders should be taught in school, the efficacy of current programs is questionable in light of the special characteristics manifested by females. Education must foster the lifelong academic, vocational, and social development of the female with emotional/behavioral disorders. To do this, educational programs must be responsive to the unique needs and characteristics presented by females with emotional/behavioral disorders.

References

American Psychiatric Association (1987). Diagnostic and statistical manual of mental disorders (3rd ed. revised). Washington, D.C.; Author.

Bodinger-Deuriarte, C. (1991). Female adolescents: What prevention programs need to know (Update 9). The Northwest Report, September.

Bowers, L.B. (1990). Traumas precipitating female delinquency: Implications for assessment, practice, and policy. Child and Adolescent Social Work, 7, 389-402.

Epstein, M., Cullinan, D., and Lloyd, J. (1986). Behavior problem patterns among learning disabled: III- Replication across age and sex. Learning Disabilities Quarterly, 9, 43-54.

Frank, A.R., Sitlington, P.L., and Carson, R. (1991). Transition of adolescents with behavioral disorders - Is it successful? Behavior Disorders, 16, 180-191.

French, D.C. Heterogeneity of peer-rejected girls. Child-Development, 61(6) 2028-31.

Gibson, H.E. (1976). Women's prisons: laboratories for penal reform. In L. Crites (Ed.), The Female Offender (pp. 93-120). Massachusetts: D.C. Heath and Company.

Kandel, D.B., Raveis, V.H., and Kandel, P.I. (1984). Continuity in discontinuities: Adjustment in young adulthood of former school absentees. Youth & Society, 15, 325-352.

Kaufman, J. (1989). Characteristics of behavior disorders of children and youth (4th ed.) Columbus, OH: Merrill.

Kruttschnitt, C. (1982). Women, crime, and dependency: an application of the theory of law. Criminology, 19, 495-513.

Lerner, H.E. (1983). Female dependency in context: some theoretical and technical considerations. American Journal of Orthopsychiatry, 53, 697-705.

Lewis, D.O., Yeager, C.A., Cobham-Portorreal, C.S., Klein, N., Showalter, C., and Anthony, A. (1991). A follow-up of female delinquents: Maternal contributions to the perpetuation of deviance. Journal of the Academy of Child and Adolescent Psychiatry, 30, 197-201.

National Council of Jewish Women. (1984). Adolescent girls in the juvenile justice system. National Council of Jewish Women.

Pennington, B.F. (1991). Diagnosing learning disorders. New York, NY: Guilford.

Robins, L.N. and Ratcliff, K.S. (1980). The long-term outcome of truancy. In L. Hersov & I. Berg (Eds.), Out of school. New York, NY: Wiley.

Schultz, R.M. (1987). Truancy: Issues and Interventions. Behavioral Disorders, 12, 117-130.

Stevens, B.J. (1987). Cheap thrills and humble pie: The adolescence of female suicide attempters. Suicide and Life Threatening Behavior, 17(2), 107-118.

Trapani, C. (1991). Transition goals for adolescents with learning disabilities. Austin, TX: Pro-Ed.

Weisheit, R. & Mahan, S. (1988). Women, Crime and Criminal Justice. Cincinnati, OH: Anderson.

Young, R.L., Godfrey, W., Matthews, B. and Adams, G.R. (1983). Runaways: A review of the consequences. Family Relations, 32, 275-281.